

## **DECLARATION AND POWER OF ATTORNEY**

ATTORNEY'S DOCKET NO.

As a below named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled MODIFIED THERMOSTABLE DNA POLYMERASE , the specification of which

x is attached hereto.	74 🗻
was filed on	as
United States Application	Number or PCT International
Application Number	
and was amended on	
(if appli	cable)

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in Title 37, Code of Federal Regulations, § 1.56.

## PRIOR FOREIGN APPLICATION(S)

I hereby claim foreign priority benefits under Title 35, United States Code, § 119(a)-(d) or §365(b) of any foreign application(s) for patent or inventor's certificate, or §365(a) of any PCT International application which designated at least one country other than the United States, listed below and have also identified below any foreign application for patent or inventor's certificate or PCT International application having a filing date before that of the application on which priority is claimed:

APPLICATION NUMBER	DATE OF FILING (day, month, year)	DATE OF ISSUE (day, month, year)	PRIORITY CLAIMED UNDER 35 U.S.C. § 119
2000-138796	11/05/2000		Yes
claim the benefit t	under Title 35, U		, § 119(e) of any
	FILING DATE (day, month, year)		
cation(s), or §365(cation(s), or §365(cation(s), or §365(cation)) is not disclosed in manner provided knowledge the durined in Title 37, Cathe filing date of	c) of any PCT Into insofar as the sub in the prior Uni by the first para uty to disclose in Code of Federal I I the prior appli	ernational application of eact ted States or PC agraph of Title 3. Information which Regulations, § 1.5	ation designating ach of the claims  T International  5, United States  h is material to  6 which became
FILING DATE (day, month, year)		STATUS (i.e. Patented	l, Pending, Abandoned)
(Reg. No. 18,918	3)	ereby appoint the	following
	claim the benefit exional application  claim the benefit exions application  claim the benefit exion application application  is not disclosed manner provided knowledge the dined in Title 37, Control the filing date of this application applic	NUMBER  (day, month, year)  2000-138796  11/05/2000  PRIOR UNITED STATES APPL  claim the benefit under Title 35, Usional application(s) listed below.  FILING DATE (day, month, year)  claim the benefit under Title 35, cation(s), or §365(c) of any PCT Intelested below and, insofar as the substant of the prior Unimanner provided by the first paraknowledge the duty to disclose it ined in Title 37, Code of Federal I the filing date of the prior appliedate of this application:  FILING DATE (day, month, year)	NUMBER  (day, month, year)  (day, month, year)  (day, month, year)  PRIOR UNITED STATES APPLICATION(S)  claim the benefit under Title 35, United States Code sional application(s) listed below.  FILING DATE (day, month, year)  claim the benefit under Title 35, United States Code sional application(s), or §365(c) of any PCT International application is not disclosed in the prior United States or PC manner provided by the first paragraph of Title 37, Knowledge the duty to disclose information which ined in Title 37, Code of Federal Regulations, § 1.5 the filing date of the prior application and the redate of this application:  FILING DATE (day, month, year)  RNEY: As a named inventor, I hereby appoint the (Reg. No. 18,918)

## SEND CORRESPONDENCE, AND DIRECT TELEPHONE CALLS TO:

26646

PATENT TRADEMARK OFFICE

EDWARD W. GREASON KENYON & KENYON One Broadway New York, New York 10004 (212) 425-7200 (phone) (212) 425-5288 (facsimile)

I declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under § 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issuing thereon.

			SECOND GIVEN NAME
FULL NAME OF INVENTOR	FAMILY NAME	FIRST GIVEN NAME	3200.10 017 2.1 1.1 1.1
	KUROITA	Toshihiro	
RESIDENCE & CITIZENSHIP	СПҮ Tsuruga-shi	STATE OR FOREIGN COUNTRY Fukui-ken, Japan	COUNTRY OF CITIZENSHIP Japan
POST OFFICE ADDRESS	POST OFFICE ADDRESS  c/o Tsuruga Institute of  Biotechnology of TOMO BOSEKI	спү Tsuruga-shi	STATE & ZIP CODE/COUNTRY Fukui-ken, Japan
Signature	Toshihiro Kuro	Date	25, 2001

				,	
	FULL NAME OF INVENTOR	FAMILY NAME	FIRST GIVEN NAME		SECOND GIVEN NAME
		KITABAYASHI	, Masao		
	RESIDENCE & CITIZENSHIP	СПУ	STATE OR FOREIGN COUNTRY		COUNTRY OF CITIZENSHIP
	CITIZZINGIA	Tsuruga-shi	Fukui-ken, Japan		Japan
	POST OFFICE ADDRESS	rost office address c/o Tsuruga Institute of Biotechnology of TOMO BOSEKI KABUSHIKI KAISHA, 10-24, Toy	спү Tsuruga-shi o-cho,		STATE & ZIP CODE/COUNTRY Fukui-ken, Japan
	Signature	masao Kitabayashi	Date		25, 2001
	FULL NAME OF INVENTOR	FAMILY NAME ISHIDA	FIRST GIVEN NAME Yoshikazu		SECOND GIVEN NAME
	RESIDENCE & CITIZENSHIP	СПУ	STATE OR FOREIGN COUNTRY		COUNTRY OF CITIZENSHIP
		Tsuruga-shi	Fukui-ken, Japan		Japan
	POST OFFICE ADDRESS	POST OFFICE ADDRESS c/o Tsuruga Institute of Biotechnology of TOMO BOSEKI	спү Tsuruga-shi		STATE & ZIP CODE/COUNTRY Fukui-ken, Japan
			Date April 25, 2001		L 25, 2001
	FULL NAME OF INVENTOR	FAMILY NAME KOMATSUBARA	FIRST GIVEN NAME Hideyuki		SECOND GIVEN NAME
	RESIDENCE & CITIZENSHIP	CTTY Tsuruga-shi	STATE OR FOREIGN COUNTRY Fukui-ken, Japan		COUNTRY OF CITIZENSHIP Japan
	POST OFFICE ADDRESS	POST OFFICE ADDRESS c/o Tsuruga Institute of Biotechnology of TOMO BOSEKI KARLSHIKI KAISHA, 10-24, Toy	спү Tsuruga-shi -dp,		STATE & ZIP CODE/COUNTRY Fukui-ken, Japan
	Signature 7	idegulei Komatertine		Date Apri	1 25, 2001

	FULL NAME OF INVENTOR	FAMILY NAME NISHIYA ',	FIRST GIVEN NAME Yoshiaki		SECOND GIVEN NAME
	RESIDENCE & CITIZENSHIP	спү Tsuruga-shi	STATE OR FOREIGN COUNTRY Fukui-ken, Japan		COUNTRY OF CITIZENSHIP Japan
	POST OFFICE ADDRESS	POST OFFICE ADDRESS c/o Tsuruga Institute of Biotechnology of TOMO BOSEKI KARUSHIKI KAISHA, 10-24, Toyo	спү Tsuruga-shi -dro,		STATE & ZIP CODE/COUNTRY Fukui-ken, Japan
	Signature (	Joshiaki Nishiya		Date April	25, 2001
	FULL NAME OF INVENTOR	FAMILY NAME KAWAKAMI	FIRST GIVEN NAME Bunsei		SECOND GIVEN NAME
	RESIDENCE & CITIZENSHIP	CITY Tsuruga-shi	STATE OR FOREIGN COUNTRY Fukui-ken, Japan		COUNTRY OF CITIZENSHIP Japan
	POST OFFICE ADDRESS	POST OFFICE ADDRESS c/o Tsuruga Institute of Biotechnology of TOMO BOSEKI KABUSHIKI KAISHA, 10-24, Toyo	city Tsuruga-shi -dho,		STATE & ZIP CODE/COUNTRY Fukui-ken, Japan
	Signature Z	Runsei Kawakan		Date April	25, 2001
	FULL NAME OF INVENTOR	FAMILY NAME KAWAMURA	FIRST GIVEN NAME Yoshihisa		SECOND GIVEN NAME
1	RESIDENCE & CITIZENSHIP	CTTY Tsuruga-shi	COUNTRY		COUNTRY OF CITIZENSHIP Japan
	POST OFFICE ADDRESS	POST OFFICE ADDRESS C/O TSUNGA Institute of Biotechnology of TOMO BOSEKI KABUSHIKI KAISHA, 10-24, TO	СПҮ [ Tsuruga-shi p-cho,		STATE & ZIP CODE/COUNTRY Fukui-ken, Japan
		Joshihisa Kawamu	a	Date April	25, 2001
	66993-1				

ogergee ostol

FULL NAME OF INVENTOR	FAMILY NAME IMANAKA	FIRST GIVEN NAME  Tadayuki  STATE OR FOREIGN COUNTRY Osaka-fu, Japan		SECOND GIVEN NAME
RESIDENCE & CITIZENSHIP	спү Suita-Shi			COUNTRY OF CITIZENSHIP Japan
POST OFFICE ADDRESS	POST OFFICE ADDRESS 28-11, Fujishirodai 2-chome,	спү Suita-shi		STATE & ZIP CODE/COUNTRY Osaka-fu, Japan
Signature	ature Jadayuki Imanaka Date Apri		11 25, 2001	
FULL NAME OF INVENTOR	FAMILY NAME	FIRST GIVEN NAME  STATE OR FOREIGN  COUNTRY		SECOND GIVEN NAME
RESIDENCE & CITIZENSHIP	СПҮ			COUNTRY OF CITIZENSHIP
POST OFFICE ADDRESS	POST OFFICE ADDRESS	CITY		STATE & ZIP CODE/COUNTRY
Signature		1	Date	
FULL NAME OF INVENTOR	FAMILY NAME	FIRST GIVEN NAME		SECOND GIVEN NAME
RESIDENCE & CITIZENSHIP	спү	STATE OR FOREIGN COUNTRY		COUNTRY OF CITIZENSHIP
POST OFFICE ADDRESS	POST OFFICE ADDRESS	спү		STATE & ZIP CODE/COUNTRY
Signature		Date		
66993-1				